MADHAVRAO SCINDIA): (a) There is no proposal to ban smoking in trains. However, as an experimental measure, the Railways are considering a proposal to earmark some compartments/coaches as non-smoking areas on some selected trains.

(b) No, Sir.

Survey of Parli-Beed-Ahmadnagar Railway Line

*319. SHRI BAPU KALDATE: Will the Minister of RAILWAYS be pleased to state:

(a) whether Government have undertaken/decided to conduct a survey of Parli-Beed-Ahmadnagar railway line;

(b) if so, whether the survey has started; and

(c) when the survey work is likely to be completed?

THE DEPUTY MINISTER IN THE MINISTRY OF RAILWAYS (SHRI MAHABIR PRASAD): (a) Yes, Sir.

(b) No, Sir.

(c) The survey is expected to be completed in 1989-90.

Expert's Report on Kala-Azar Disease

*320. SHRI SHARAD YADAV:
SHRI RAM AWADHESH SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Experts on Kala-azar appointed by Government in 1985 had made certain recommendations to control the disease but the measures suggested by them are yet to be implemented;

(b) whether Government are aware that Kala-azar disease is rapidly spreading in Bihar, affecting 25 of the 39 districts in the State and that the number of deaths has been steadily increasing;

(c) if so, what is the nature and the quantum of the Central assistance given to the Government of Bihar to control the disease so far, as against the demand stating the reasons for not implementing the measures suggested by the Experts to control the disease; and

(d) what steps are contemplated by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (d) The Group of Experts on Kala-azar constituted by Government of India had, recommended that a National Kala-azar Control Programme should be launched in the country.

The recommendations of the Group of Experts on Kala-azar was considered and it was decided that in view of the focal nature of the disease, the programme for control of Kala-azar should be taken up in the endemic States of Bihar and West Bengal as an extension of malaria control activities with 50:50 funding pattern subject to the Government of Bihar and West Bengal agreeing to provide matching contribution While the Government of West Bengal had agreed to the launching of Kala-azar Control Programme on 50:50 cost sharing basis between the Centre and State, no reply has been received from the Government of Bihar so far.

According to the information received from the Government of Bihar, 17,471 cases (prov.) with 74 deaths have occurred in 23 districts in Bihar during the year 1987 due to Kala-azar against 14,039 cases and 47 deaths reported in 1986.

DDT spray being carried out in the Kala-azar endemic areas from insecticides supplied under National Malaria Eradication Programme (Rural) The drugs are procured by the State Governments.

This issue came up again for detailed discussion in the Central Council of Health and Family Welfare in its meeting held in February, 1988. The Council has